

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10/775963 FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1			1			
2				1		
3					1	
4					1	
5						1
6						1
7						1
8						1
9						1
10					1	
11						1
12	1		1			
13	12		12			
14			1			
15	1		1			
16	1		1			
17			1			
18			1			
19	1		1			
20	1		1			
21	1		1			
22	12		12			
23	12		1			
24	1		1			
25	1		1			
26	12		12			
27						
28	12		1			
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47						
48						
49						
50						
TOTAL IND.						
TOTAL DEP.			60			
TOTAL CLAIMS		61				

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS		61				